

Application Data Sheet

Application Information

Application number::

Filing Date:: 12/21/04

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:

Computer Readable Form (CRF)?:

Number of copies of CRF::

Title:: METHOD AND DEVICE FOR HIGH SENSITIVITY
DETECTION OF THE PRESENCE OF DNA AND
OTHER PROBES

Attorney Docket Number:: 50304/053001

Request of Early Publication?: No

Request of Non-Publication?: No

Suggested Drawing Figure:: 11

Total Drawing Sheets:: 7

Small Entity?: Yes

Petition Included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Belgium
Status:: Full Capacity

Given Name:: Denis

Middle Name::

Family Name:: Flandre

Name Suffix::

City of Residence:: Bruxelles

State or Province of Residence::

Country of Residence:: Belgium

Street of mailing address:: Rue des Archives 126

City of mailing address:: Bruxelles

State or Province of mailing address::

Country of mailing address:: Belgium

Postal or Zip Code of mailing address:: B-1170

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Mexico

Status:: Full Capacity

Given Name:: Luis

10/519014

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Middle Name:: Moreno
Family Name:: Hagelsieb
Name Suffix::
City of Residence:: Zapopan
State or Province of Residence:: Jalisco
Country of Residence:: Mexico
Street of mailing address:: Tejocotes 2171
Fracc. Tabachines
City of mailing address:: Zapopan
State or Province of mailing address:: Jalisco
Country of mailing address:: Mexico
Postal or Zip Code of mailing address:: MX-45180

Applicant Authority Type:: Inventor
Primary Citizenship Country:: France
Status:: Full Capacity
Given Name:: Rémi
Middle Name::
Family Name:: Pampin
Name Suffix::
City of Residence:: Antony
State or Province of Residence::
Country of Residence:: France
Street of mailing address:: Rue Joseph Bricon 17
City of mailing address:: Antony

State or Province of mailing address::

Country of mailing address:: France

Postal or Zip Code of mailing address:: F-92160

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Belgium

Status:: Full Capacity

Given Name:: David

Middle Name::

Family Name:: Bourgeois

Name Suffix::

City of Residence:: Papignies

State or Province of Residence::

Country of Residence:: Belgium

Street of mailing address:: Rue de la Station 19

City of mailing address:: Papignies

State or Province of mailing address::

Country of mailing address:: Belgium

Postal or Zip Code of mailing address:: B-7861

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Belgium


Status:: Full Capacity


Given Name:: José

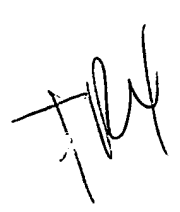
Middle Name::

10/519014

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Family Name:: Remacle
Name Suffix::
City of Residence:: Malonne 
State or Province of Residence::
Country of Residence:: Belgium
Street of mailing address:: 14, chemin des Pierres
City of mailing address:: Malonne
State or Province of mailing address::
Country of mailing address:: Belgium
Postal or Zip Code of mailing address:: B-5020

Applicant Authority Type:: Inventor
Primary Citizenship Country:: France
Status:: Full Capacity
Given Name:: Pierre-Emmanuel 
Middle Name::
Family Name::

Lobert
Name Suffix::
City of Residence:: Somain 
State or Province of Residence::
Country of Residence:: France
Street of mailing address:: 35, rue Fernand
City of mailing address:: Somain
State or Province of mailing address::
Country of mailing address:: France

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Postal or Zip Code of mailing address:: F-59490

Correspondence Information

Correspondence Customer Number:: 21559

Representative Information

Representative Customer Number:: 21559

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National stage of	PCT/BE2003/000109	6/24/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
EP	02447122.9	6/24/02	YES

Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State of Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::